

at all recovered from the anaesthetic. In addition, there will necessarily be many incidental—and accidental, too, I fear—happenings that must receive more or less attention.

I wish much thought might be given to this particular field of our work. What should be the relation of the small hospital to the work at large? What suggestion can be made to aid superintendents to *keep* the professional side of the work on a good, healthy basis?

I trust that many others may be heard from upon this subject.

THE NURSES' SETTLEMENT IN RICHMOND *

BY MISS MINOR AND MISS CABANISS

THE Nurses' Settlement of Richmond has established a system of district or instructive visiting nursing, a source of help and comfort to those who can neither afford a private nurse, nor, for excellent reasons, enter a hospital. This system of nursing is also a valuable adjunct to the City Board of Health, as it is frequently possible for the intelligent nurse to call the attention of a physician to a case of some contagious disease, the family not recognizing serious symptoms, and, by aiding in the establishment of rigid quarantine and prompt medical care, prevent the spread of such diseases.

Physicians and others requiring them can obtain at reasonable rates properly prepared surgical dressings.

A diet kitchen, to supply broths and delicacies for people of means as well as to furnish gratis the needy district patient, also exists in the settlement.

Besides the district nurses, other nurses reside at the settlement who give what leisure time they can afford (between private duty cases) to anyone requiring skilled nursing for which they cannot pay. Special nursing has been thus supplied in several charitable institutions and to some very ill district patients in this manner.

Classes in "Home Nursing" have also been conducted by the settlement nurses, and a "Loan Closet," equipped by friends of the settlement and also of the Instructive Visiting Nurse Association of the Nurses' Settlement, has brought untold comfort and order into many sick-rooms in this city since the winter of 1901. Many of the various guilds and societies in the churches, particularly the Daughters of In-

* From the first annual report, a letter by Miss Minor, and a short article by Miss Cabaniss in the *Johns Hopkins Alumnæ Magazine* we are able to show the progress and enterprise of our Virginia members.—Ed.]

dustry, have contributed generously to this department of the work, enabling the nurses to lend sufficient bedclothing and sick-room utensils to keep their patients tidy and comfortable in the humblest of homes.

“Through the courtesy of Dr. Mary Sherwood and others,” writes Miss Cabaniss in the *Johns Hopkins Hospital Alumnae Magazine*, “we secured some information as to the improved system of nursing at Bay View Hospital, Baltimore, and made strenuous effort to introduce something similar on a smaller scale into the so-called City, or Almshouse, *Hospital* of Richmond.

“We secured good, earnest women as pupils, thinking to begin by training attendants or care-takers, until we could work up to something better. But self-righteousness is a terrible hindrance to progress, and when we solicited the committee from the City Fathers for their support of a *regular* ‘Code of Hospital Regulations,’ a perfect howl went up, and we were remonstrated with in serious fashion for casting slurs upon a branch of municipal government which, up to the time of our *speaking*, had escaped all suggestion of corruption, etc. It is not always advisable to *call* a spade by its name, though one may with propriety vaguely suggest its existence. It is also difficult to make a politician, a lawyer, or a candle-stick maker see a fine point in hospital etiquette or equipment, so when the physician-in-chief *retracted* his agreement to assist his juniors, the internes, to instruct our class of pupils, our plans collapsed. Lack of proper hospital system, etc., led ultimately to an epidemic of smallpox, which resulted in the death of one of our courageous, good young attendants, the serious illness of another, the spread of the dread disease into one of the rural districts, to say nothing of expense and other attendant ills. At present that branch of work is “under observation,” the *line* of treatment not yet determined upon, though the name must be changed or the place must be altered to agree with it. We still live, we therefore hope!

“Classes for working women have been conducted throughout the year with excellent results. This winter we began our Social Clubs for Boys and Girls—these afford us great pleasure and seem much appreciated by most of the children.

“Among our new residents is a young woman who conducts a gymnasium for women and children. She has offered the use of her gymnasium to any of our classes, and will instruct them herself.

“The City Mission, practically our Charity Organization, has its office and agent in our Settlement House.

“We have been working very hard lately to establish a Metropolitan Registry or Central Registry for Nurses, to find out who and what is

doing private nursing in our midst, and also to afford physicians and the public better facilities for securing the services of nurses.

"The district record books of the three nurses for the past year show the following statistics:

"FOR ONE YEAR ENDING FEBRUARY 15, 1903.

	VISITS
	CASES
" Visits for actual care of patients, and also for supervision or advice	3405
Medicine and proper diet supplied to.....	188
Clothing (personal and bed-linen) given or loaned, also sick-room utensils supplied to.....	146
Milk tickets issued to.....	57
Ice tickets issued to.....	35
Referred to City Mission.....	14
Referred to City Board of Health.....	8
Referred to Superintendent of Public Charities, for fuel, food, transportation to hospital or Almshouse.....	29
Referred to Dr. Maybee (Children's Aid Society).....	9
Referred to Lee Camp Auxiliary.....	2
Referred to King's Daughters.....	3
Referred to country for favorable environment.....	2
Referred to Law and Equity Court.....	2
Sent to hospitals and admission arranged for.....	45
Sent to dispensaries for treatment.....	31
Doctor's services obtained for.....	66
Care-taker or special nurse supplied for.....	23"

DEBT DUE TO THE NURSES

ONE PHYSICIAN WHO APPRECIATED THE SERVICES OF A TRAINED NURSE

"Now, doctor," said the trained nurse to the great physician, "what do I owe you?"

The wear and tear of her calling had begun to tell, and the nurse had taken her turn at playing patient. After a dozen visits she had come to pay her bill.

The specialist looked at her a moment gravely. Then he said, "You know I charge seventeen dollars and fifty cents for a prescription."

The nurse gave a little, involuntary gasp of alarm. "Oh doctor," she exclaimed, "you mean for each prescription? Why, I've been here—"